

Spokane County Medical Society

PROJECT ACCESS

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Partners and Grantors

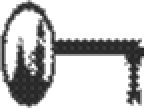
- Spokane County Medical Society Foundation
 - Foundation Northwest
 - Physician Hospital Community Organization
 - WSU Intercollegiate School of Nursing
 - Providence Services Eastern Washington
 - Empire Health Systems
 - **Washington Health Foundation**
 - **Group Health Community Foundation**
 - Health Improvement Partnership
 - **Robert Wood Johnson Foundation**
 - **Community Health Plan of Washington**
 - **Yakima Valley Farm Workers**
 - Rotary
 - Molina
- Bold – State based
Underlined - Nationally based



What is SCMS Project Access?

physician led community partnership

Coordinated charity care system
that provides access to
the full continuum of medical care
for the low income uninsured who
are not eligible for other forms of
health insurance



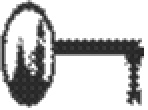
Buncombe County Project Access After 6 Years

“The health status of Buncombe County’s uninsured population has risen to within one standard deviation of national physical and mental health norms, while the cost of charity care on a per capita basis has decreased by 45%. ”



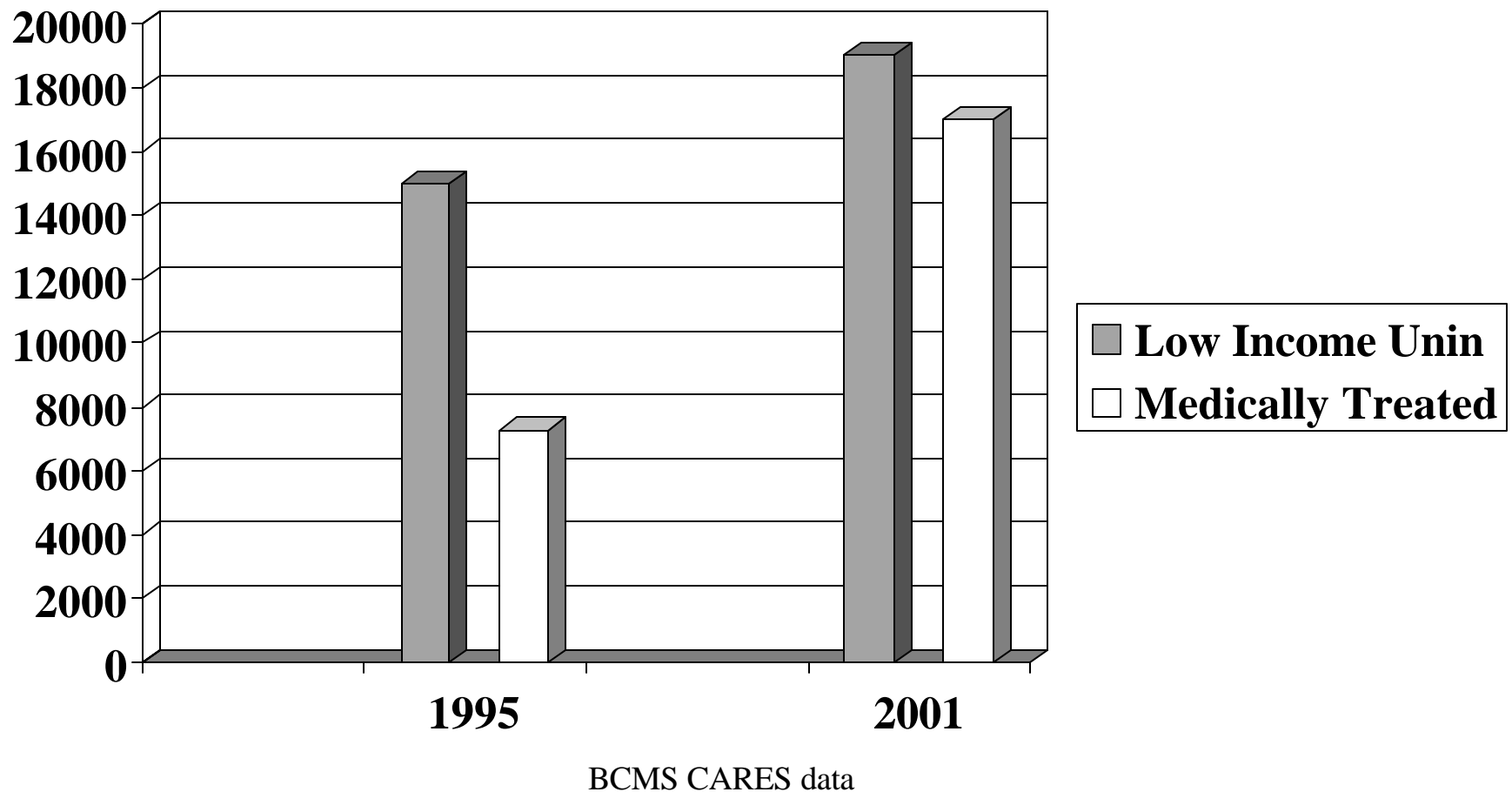
Community Commitment

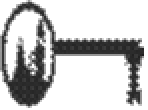
- Physicians - free care
- Hospitals - free care
- Pharmacists – dispense drugs at cost
- Medical Society – performs provider enrollment, patient eligibility tracking
- Medication – less than wholesale
- Community Clinics – screen patients at site
- Corporations – office equipment, media services (PHCO- data processing, INHS - IT support)
- Government – fund medication, administration
- Patients – responsible for keeping appointments and complying with treatment plan
- Grants – fund administration, data



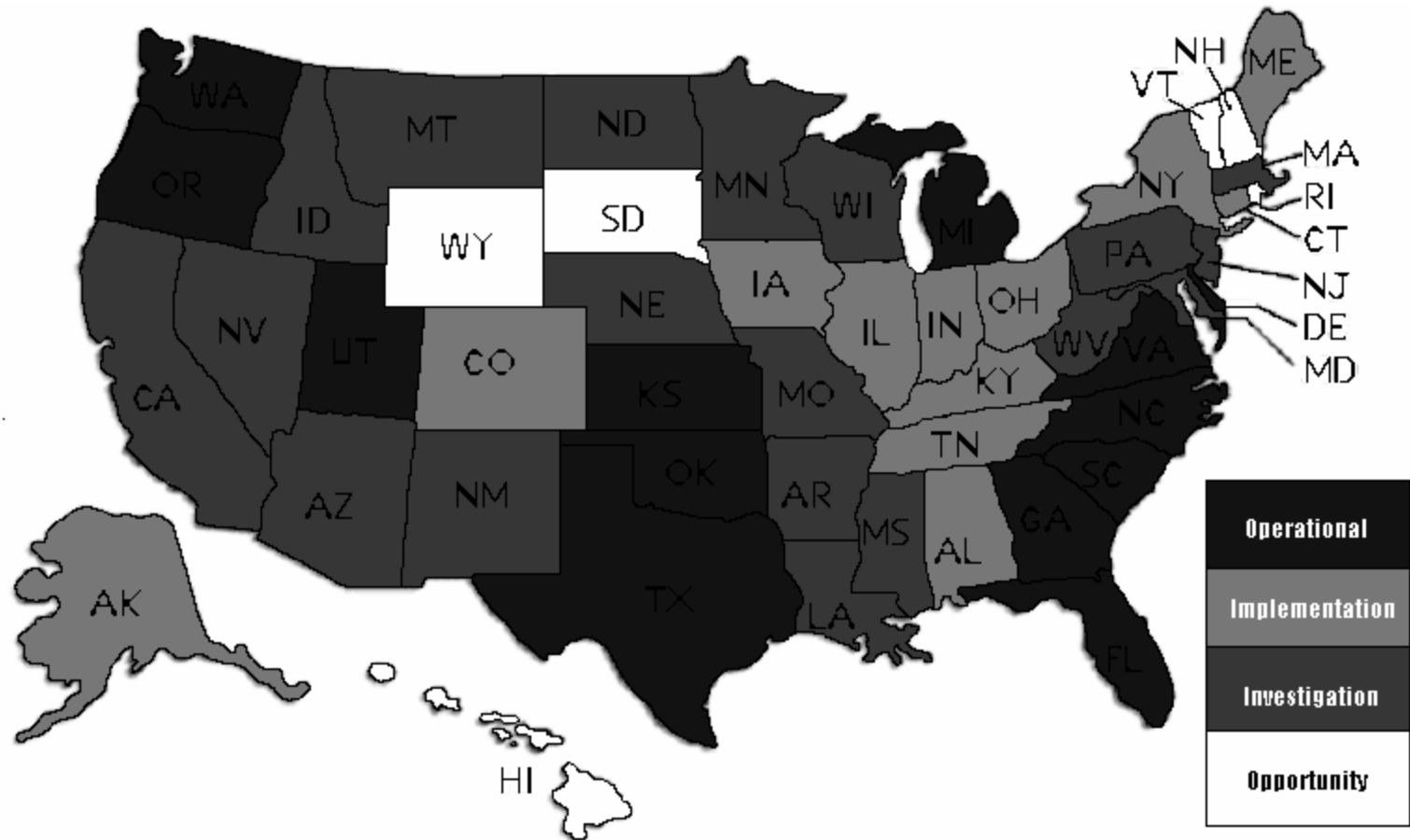
Increase in Number of Low Income Uninsured Receiving Medical Care Over 6 Years

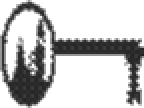
Buncombe County Medical Society Project Access





States Delivering Project Access Care – 30 Communities (250 More Developing)





Project Access – Better Healthcare for More People for Less Cost

More Patients Treated

More Medical Homes

Less Cost

Decreased ER Utilization

Decreased Cost per
Patient per Month

Healthier

Easier Specialist Referral

Improved Pharmaceutical
Availability

80% Report Better Health



HEALTH CARE IMPACT

- ASHEVILLE
(low income uninsured 15,000)
(pop. 250,000)

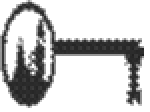
\$7,500,000 charity care/yr
(physician & hospital)

\$ 125,000 administration
\$ 350,000 pharmaceutical

- WICHITA
(low income uninsured 25,000)
(pop. 450,000)

\$7,500,000 charity care/yr
(physician & hospital)

\$ 250,000 administration
\$ 500,000 pharmaceutical

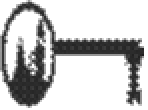


Project Access Positive Impact

Helping ourselves by coordinating what each of us does best

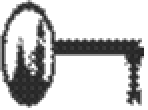
Using government only when we cannot do it individually
or through other organizations

- Business – healthier employees, larger % of newly hired are healthier
- Small business – healthcare coverage for part time employee, reduced absenteeism, increased productivity
- New business – powerful recruiter
- Community Clinics – provides specialists, reduces per patient visits, enables clinics to see more patients and focus on primary care, less wasted time for doctors, staff, patients
- Government – increases return on dollars already spent on social services



Healthier Community

- Patients treated early – less acute, less lost time
- Early referral to a specialist
- Decreased use of Emergency Department
- Increased number of patients with regular doctor
– Care coordinated
- Decreased patient visits per year to community clinics and primary care as medication and specialty care is available
- Appointments coordinated – referral appropriate, low no-show
- Additional grant money applied to healthcare – tobacco settlement

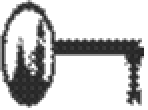


Project Access

Program Update

Important Endorsements:

- Spokane Regional Chamber of Commerce
- Spokane Valley Chamber of Commerce
- Association of NE Washington Mayors
- Foundation Northwest
- Washington Health Foundation
- The Spokane Alliance
- Spokane County Medical Society

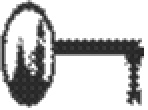


Project Access

Program Update

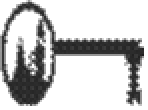
Medical Status:

- **>500** of 950 (Medical Society) M.D.'s will give free care
- All 5 hospitals in Spokane County will treat Project Access patients without charge
- Private pharmacists, Group Health Pharmacy, Community Clinic Pharmacies, (Rite Aid and Rosauers under negotiation) will waive dispensing fee and allow use of billing network free. PHCO facilitated private pharmacy network contract.
- Providence Services Eastern Washington, Group Health Community Foundation, Washington Health Foundation, Spokane County Medical Society Foundation fund start up



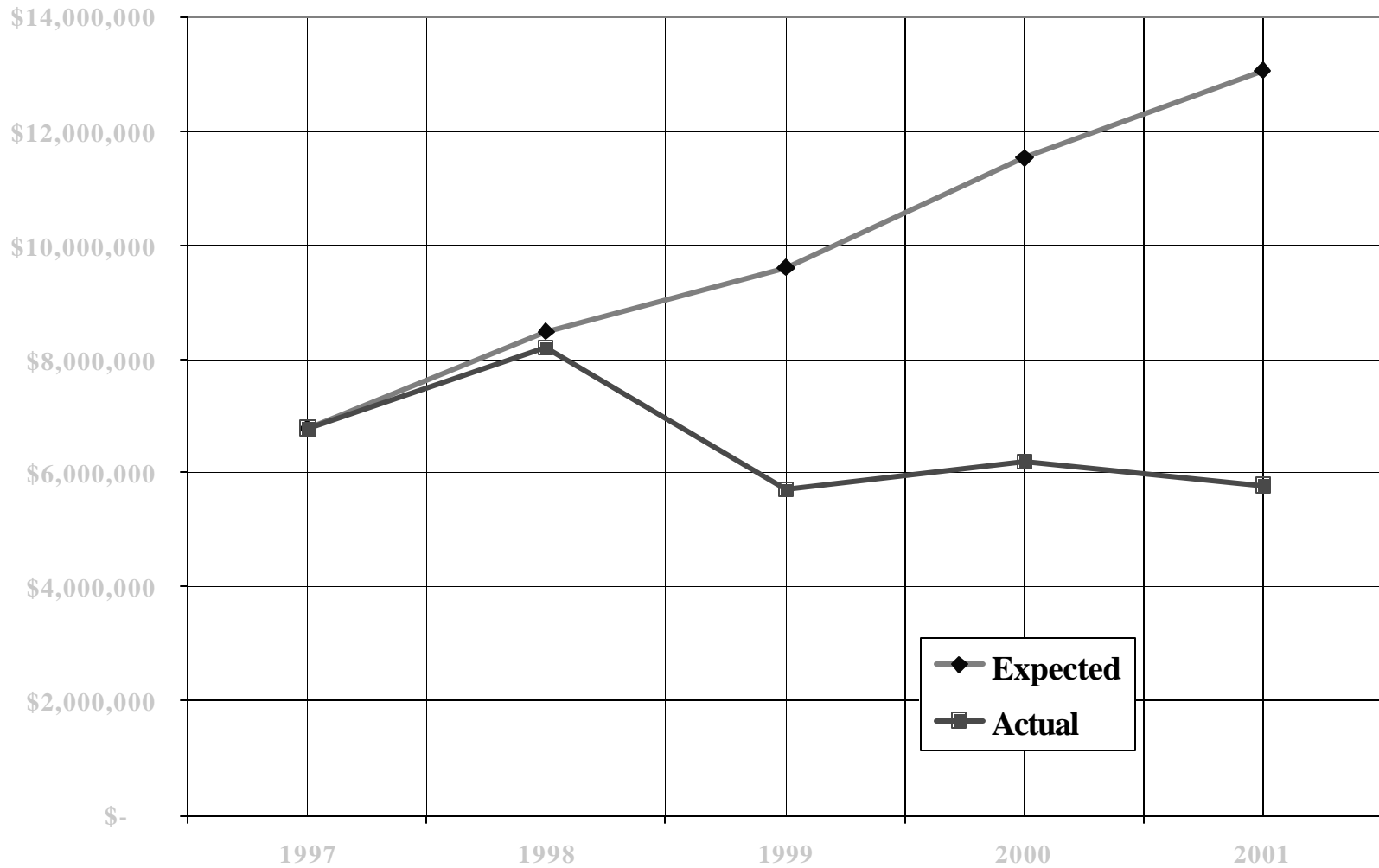
Project Access Pharmaceuticals

- Conservative formulary of permissible medicines (obtain from other project access sites so we know cost/patient)
- \$4 patient co-pay goes toward cost
- \$750 max /patient/year
- Pharmacists waive dispensing fee. Wide distribution network benefits patients while minimizing burden
- Pharmacy clearing house waives administrative fee
- Medicines at ~13% below wholesale
- Utilize pharmaceutical industry assistance program for low income (requires separate application for each medication) and “samples”
- Sustaining pharmaceuticals funded by government

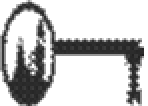


MSJ Total Charity Care Trends (97-01)

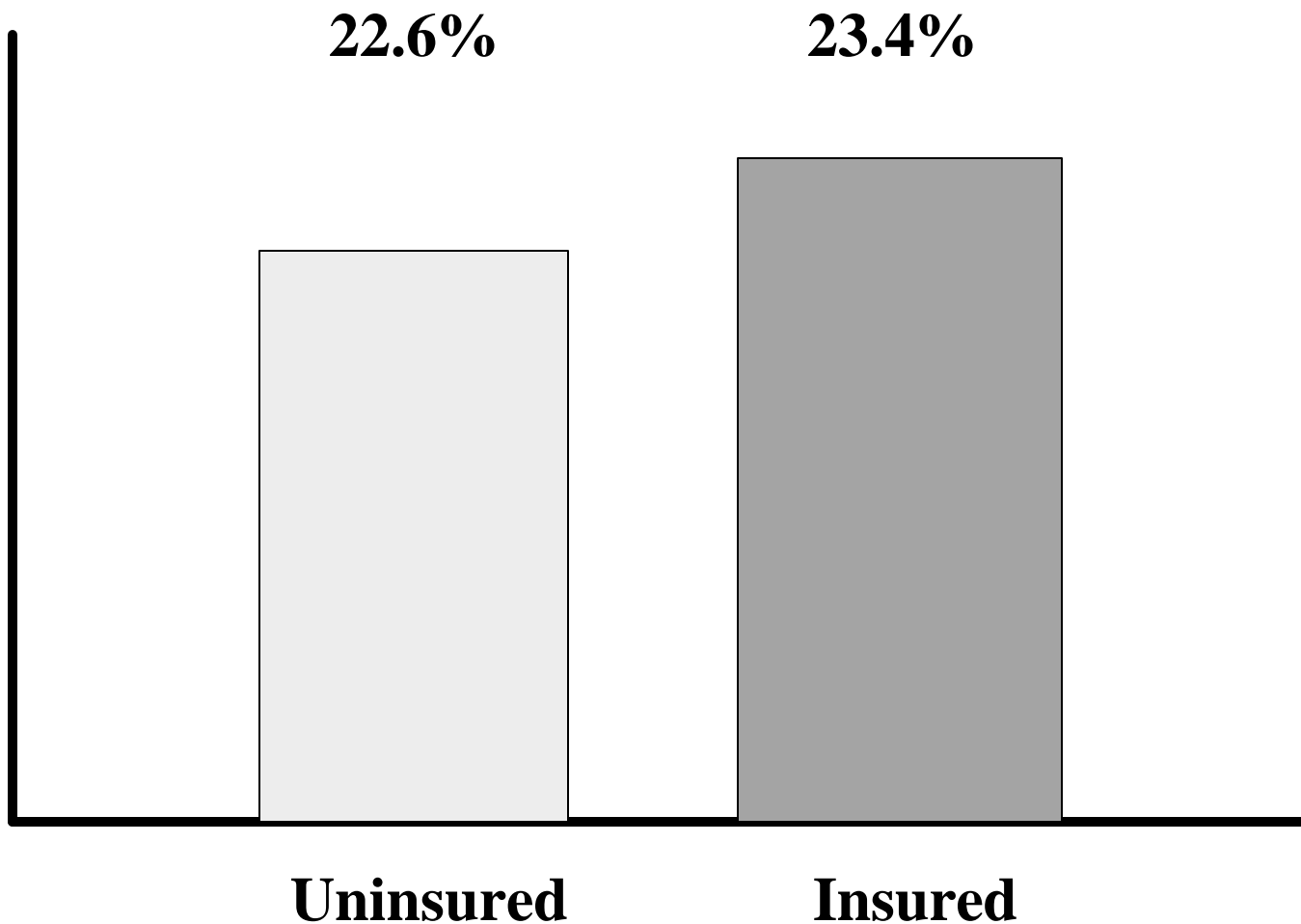
Stabilizing Costs In A PA Community



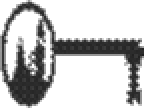
"Expected" reflects 160% increase in the uninsured from 97 to 01



Utilization of ER in the Past Year



Source: 1. 2000 PRC Community Health Survey, Professional Research Consultants
2. 2000 Buncombe County Latino Health Survey



ONLINE! JOURNAL OF BUSINESS

From Page One The issue dated May 09, 2003

Charity-care concerns climb

Hospitals here say funding cuts could cause already substantial costs to jump

By Kim Crompton

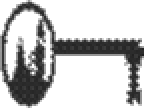
The Spokane area's four major hospitals together spent about \$12.3 million on charity care last year and wrote off about another \$13.8 million in bad debt. Though that combined \$26.1 million rose just 4 percent last year, some first-quarter figures suggest a potential sharper rate of increase this year.



WHY DOCS SHOULD SUPPORT PROJECT ACCESS

- 1. All docs already provide uncompensated care. However, since there is no system for providing support services for these patients, the doctor often feels frustrated and views the care provided as being inefficient and ineffective. Labs, xrays, meds are not available and patients may not come in for regular care since they cannot be compliant with the treatment plans. If the patient needs a referral to another doc, the original doc must take time to personally call and negotiate the referral (somewhat embarrassing for both docs) and taking more time away from seeing patients. In addition, no one but you and your staff and the patients know how much of this you are providing--it is unrecognized and not rewarded. SO WHY NOT PROVIDE UNCOMPENSATED CARE IN AN EFFICIENT AND REWARDING SYSTEM WHERE YOU CAN SEE MORE OF THE PATIENTS, THEY CAN GET THE ANCILLARY SERVICES THEY NEED, AND THE CARE YOU PROVIDE IS MEASURED AND REPORTED TO THE COMMUNITY**
- 2. A small effort from many physicians results in huge impact in increasing access to health care. There are significant ripple effects so that primary care sites can double their capacity when patients have access to specialists in timely fashion, can get labs xrays and meds that are needed.**
- 3. If all docs participate a little bit then no one doctor is overwhelmed. Equity**
- 4. Doctors' standing in the local community improves as the general population recognizes that doctors are leaders in local solutions to improve health care access crisis. This is not an insignificant issue. As health care costs rise, physicians who lead their communities in Project Access efforts are viewed more as caring professionals, rather than as businessmen who care more for money than service.**
- 5. When doctors work with other groups in the community to design Project Access-like programs the "abundance" of resources and assets are identified and can be used not only for PA programs but to help solve other issues, such as improving mental health services or dental services.**
- 6. Physicians who participate in PA-like programs can set the standard for community service for other professionals, such as dentists and dentists who might then be encouraged to provided more uncompensated care.**
- 7. When physicians provide uncompensated care, this "gift" to the community sets a normative standard that other professionals and organizations flock to duplicate. Thus the community receives many more "gifts" than it ever had before.**
- 8. It is the right thing to do. We all went into medicine to take care of patients. Project Access allows us to do that and blend it in with our usual work in the office and hospital.**
- 9. When all people can get care in a timely fashion, the whole community benefits through an improved and healthier work force, a better esprit de corps, and an enhance community spirit.**

--Suzanne Landis MD, MPH

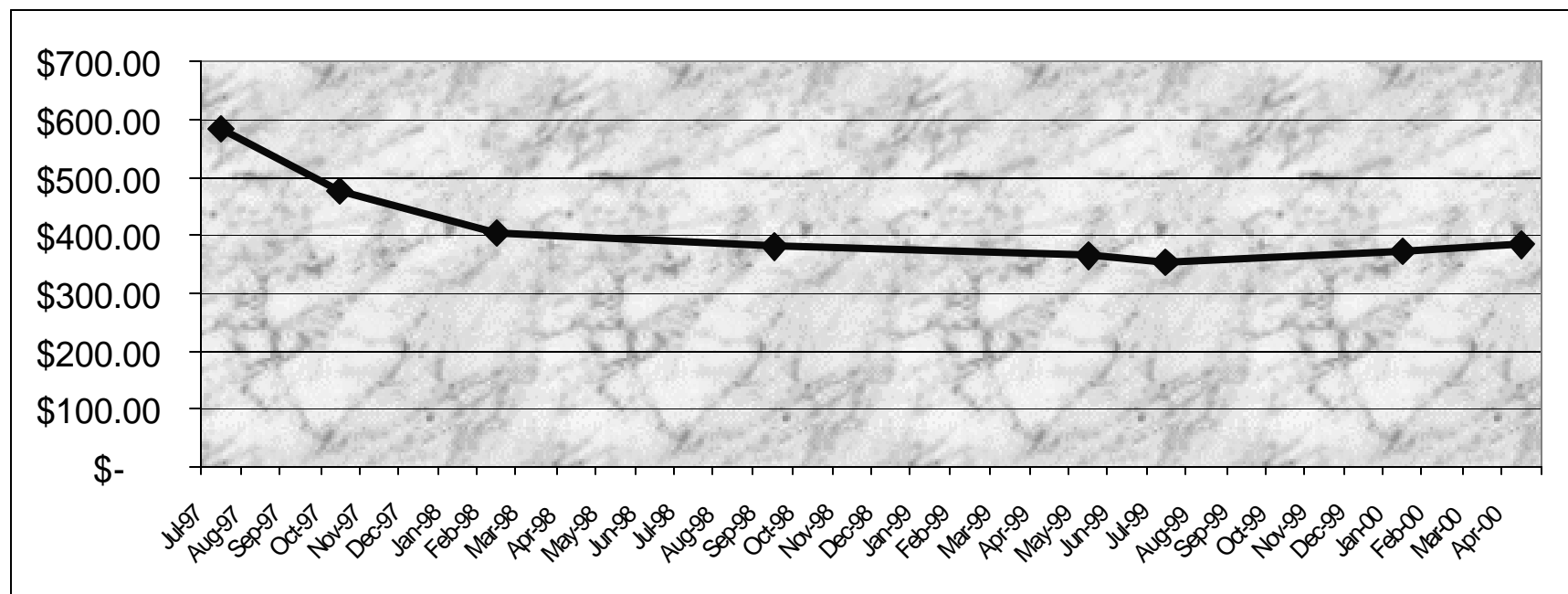


*Cost per patient per month has declined by 1/3 in both
Asheville and Wichita*

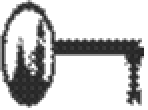
Since more services are being offered this indicates



A Healthier Population

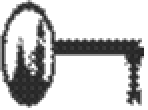


BCMS – Claims Data
Monthly Value of Services Per Patient
July 1997 - April 2000

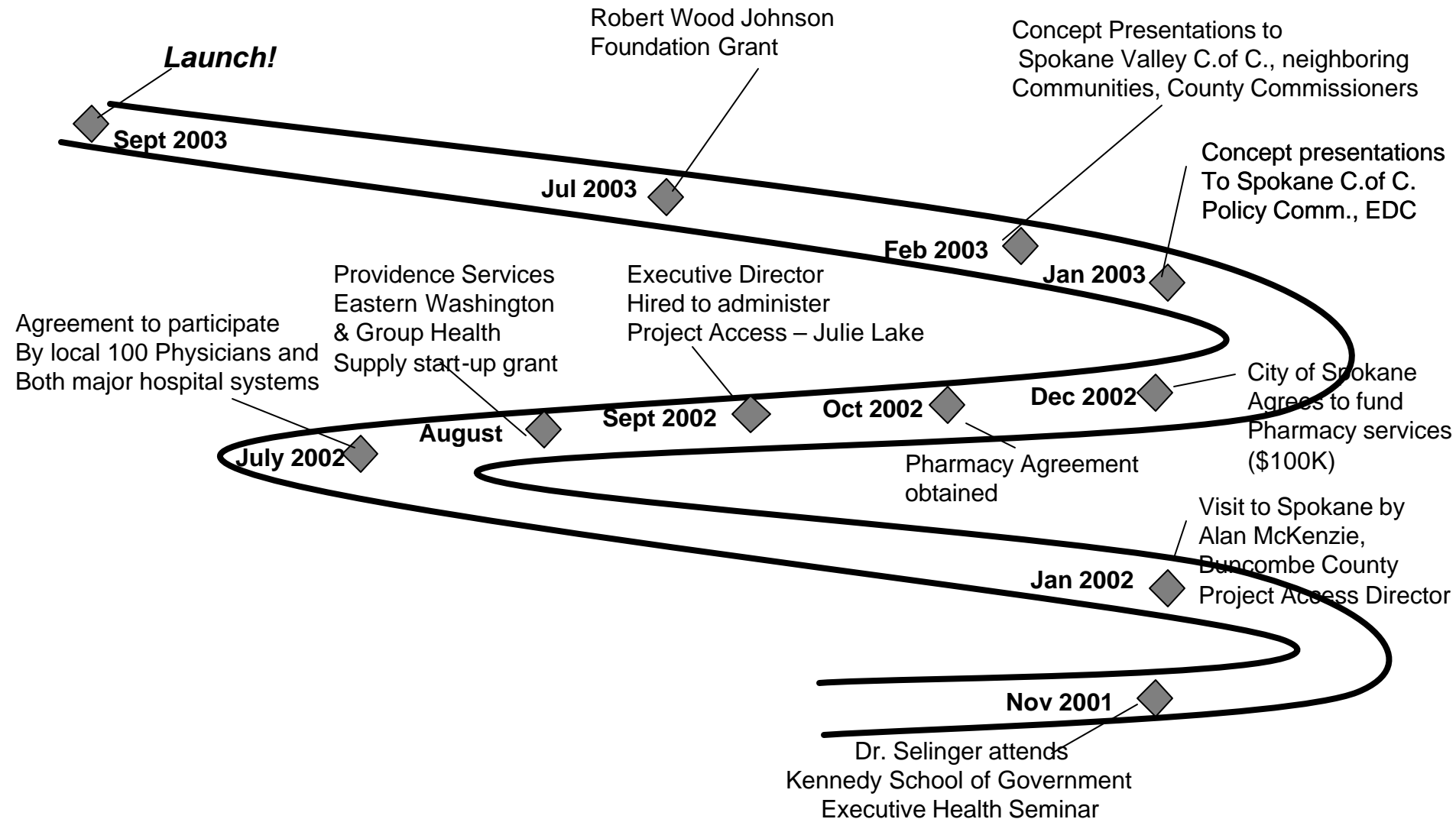


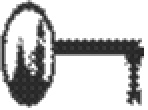
Change how we are viewed

- **Quality first** – I am a well trained, experienced professional
- **Document compassion** – This is how much I care
- **Demonstrate leadership** – I understand the system and am working to improve it
- **Join with society's concerns** – I care about every sick person, not just my patients



“Project Access” – Milestones to better healthcare in Spokane County





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